

4-16-07

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5 Applicants: Min-Jer Lin

App. No.: 10/710,399

Filing Date: 07/08/2004

Examiner: DAO H. NGUYEN

Art Unit: 2818

Docket No.: LKSP0027USA

10 Title: SEMICONDUCTOR PACKAGE AND METHOD FOR
MANUFACTURING THE SAME

To: Mail Stop 16
Commissioner for Patents
15 P.O. Box 1450
Alexandria VA 22313-1450

Subject: Request for a refund of incorrect deduction
for claims in excess of twenty pursuant to 37 CFR

20 1.26

Dear Sir,

The applicant filed a response to the Office action mailed
25 on 12/14/2006 of the above-identified application on
03/14/2007. There is no excess claim fee that needed to be
deducted.

But the fee \$150 for excess claims fee was charged from
the deposit account 50-3105 on 03/15/2007.

30

| | | | | |
|---------|----------|-------------|------|----------|
| 03/15 2 | 10710399 | LKSP0027USA | 1202 | \$150.00 |
|---------|----------|-------------|------|----------|

Document code: WFEE

United States Patent and Trademark Office
Sales Receipt for Accounting Date: 03/15/2007

DJACOBS SALE #00000002 Mailroom Dt: 03/13/2007 503105 10710399
01 FC: 1202 150.00 DA

The Fee Worksheet dated 03/16/2007 on IFW shows that total
claims are 23 and highest number previously paid for is 20
5 (Attachment 1). However, the Fee Worksheet dated 07/08/2004
on IFW shows that total claims are 25 (Attachment 2). So the
excess claims fee should not be charged.

10 Please refund the fee \$150 to the deposit account 50-3105
pursuant to 37 CFR 1.26. Your quick response is greatly
appreciated.

Sincerely yours,

15 Winston Hsu Date: 04/16/2007

Winston Hsu, Patent Agent No. 41,526
P.O. BOX 506, Merrifield, VA 22116, U.S.A.
Voice Mail: 302-729-1562
Facsimile: 806-498-6673
20 e-mail: winstonhsu@naipo.com

Note: Please leave a message in my voice mail if you need to
talk to me. (The time in D.C. is 12 hours behind the Taiwan
time, i.e. 9 AM in D.C. = 9 PM in Taiwan.)

Document code: WFEE

United States Patent and Trademark Office
Sales Receipt for Accounting Date: 03/15/2007

DJACOBS SALE #00000002 Mailroom Dt: 03/13/2007 503105 10710399
01 FC:1202 150.00 DA

Attachment 1

PTO/SB/05 (12-04)
Approved for use through 7/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

| PATENT APPLICATION FEE DETERMINATION RECORD | | | | Application or Docket Number 10710399 | Filing Date: 07/08/2004 | <input checked="" type="checkbox"/> To be Mailed | | | | |
|--|---|---|-----------|---|----------------------------|--|------------------------|----|----------------------------|------------------------|
| APPLICATION AS FILED - PART I | | | | | | OTHER THAN SMALL ENTITY | | | | |
| (Column 1) | | | | (Column 2) | | SMALL ENTITY <input type="checkbox"/> OR | | | | |
| FOR | NUMBER FILED | NUMBER EXTRA | RATE (\$) | FEES (\$) | RATE (\$) | FEES (\$) | | | | |
| <input type="checkbox"/> BASIC FEE (37 CFR 1.16(a), (b), or (c)) | N/A | N/A | N/A | | N/A | | | | | |
| <input type="checkbox"/> SEARCH FEE (37 CFR 1.16(c), (l), or (m)) | N/A | N/A | N/A | | N/A | | | | | |
| <input type="checkbox"/> EXAMINATION FEE (37 CFR 1.16(e), (h), or (i)) | N/A | N/A | N/A | | N/A | | | | | |
| TOTAL CLAIMS (37 CFR 1.16(l)) | minus 20 = | - | X \$25 = | | X \$50 = | | | | | |
| INDEPENDENT CLAIMS (37 CFR 1.16(d)) | minus 3 = | - | X \$100 = | | X \$200 = | | | | | |
| <input type="checkbox"/> APPLICATION SIZE FEE (37 CFR 1.16(m)) | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g). | | | | | | | | | |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(l)) | | | ♦ \$150 | | ♦ \$360 | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | TOTAL | | | | |
| APPLICATION AS AMENDED - PART II | | | | | | OTHER THAN SMALL ENTITY | | | | |
| (Column 1) | | | | (Column 2) | | (Column 3) | SMALL ENTITY | OR | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | 100308 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) |
| Total or C.R. 1.16(g) | - 12 | minus | - 20 | - 0 | | X \$25 = | | OR | X \$50 = | |
| Independent (37 CFR 1.16(d)) | - 1 | minus | - 3 | - 0 | | X \$100 = | | OR | X \$200 = | 0 |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(m)) | | | | | | | | OR | | |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(l)) | | | | | | TOTAL ADDL FEE | | OR | TOTAL ADDL FEE | |
| AMENDMENT B | 3/13/07 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) |
| Total or C.R. 1.16(g) | - 23 | minus | - 20 | - 3 | | X \$25 = | | OR | X \$50 = | 150.00 |
| Independent (37 CFR 1.16(d)) | - 1 | minus | - 3 | - | | X \$100 = | | OR | X \$200 = | |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(m)) | | | | | | | | OR | | |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(l)) | | | | | | TOTAL ADDL FEE | | OR | TOTAL ADDL FEE | 150.00 |
| CALCULATE | | | | | | Legal Instrument Examiner: peggy s. verbrough | | | | |
| <ul style="list-style-type: none"> If the entry in column 1 is less than the entry in column 2, enter "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p> | | | | | | | | | | |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22213-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22213-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Attachment 2**FEE TRANSMITTAL****Electronic Version v08****Stylesheet Version v08.0**

| | | | | | |
|--|---|-----------|-------------|-------------|-------------|
| Title of Invention | SEMICONDUCTOR PACKAGE AND METHOD FOR MANUFACTURING THE SAME | | | | |
| Application Number : | | | | | |
| 'Date : | | | | | |
| First Named Applicant: | Min-Jer Lin | | | | |
| Attorney Docket Number: | LKSP0027USA | | | | |
| TOTAL FEE AUTHORIZED \$ 900 | | | | | |
| Patent fees are subject to annual revisions on or about October 1st of each year. | | | | | |
| Filing as large entity | | | | | |
| BASIC FILING FEE | | | | | |
| Fee Description | Fee Code | Amount \$ | Fee Paid \$ | | |
| Utility Filing Fee | 1001 | 770 | 770 | | |
| Subtotal For Basic Filing Fees: \$ 770 | | | | | |
| EXTRA CLAIM FEES | | | | | |
| Fee Description | Extra Claim | Fee Code | Amount \$ | Fee Paid \$ | |
| Total Claims : 25 | 5 | 1202 | 18 | 90 | |
| Independent Claims : 2 | 0 | 1201 | 86 | 0 | |
| Subtotal For Extra Claims Fees: \$ 90 | | | | | |
| ASSIGNMENT FEES | | | | | |
| Fee Description | Property Number | Quantity | Fee Code | Amount \$ | Fee Paid \$ |
| Recording Each Patent | 00000000 | 1 | 8021 | 40 | 40 |
| Subtotal For Additional Fees: \$40 | | | | | |
| AUTHORIZED BILLING INFORMATION | | | | | |
| The commissioner is hereby authorized to charge indicated fees and credit any overpayments to: | | | | | |
| Deposit account number: | 503105 | | | | |
| Access Code | **** | | | | |
| Deposit name: | North America Intellectual Property Corporation | | | | |
| Deposit authorized name: | WINSTON HSU | | | | |
| Signature: | VAEB-JMXX-8IIL | | | | |